

THE NURSING OF NERVOUS PATIENTS

OCCASIONALLY we hear some one remark, "Oh, I have only a nervous case. It doesn't amount to much. We read and drive and such things,—really a cinch, you know." But the nursing of a nervous patient is not a cinch by any means. It is, practically speaking, the most difficult form of nursing.

In the first place, one must not be nervous oneself. One must forget one's nerves, and when this has been accomplished, then there comes the difficult task of trying to make the patient become unconscious of hers, and still to treat those self-same nerves with all the proper respect that their owner demands and expects.

There are many methods, in these days of modern science, by which nervous patients are treated; many great men who are devoting their whole lives to this important study; but I think that I can safely say, that one and all of these methods and their originators agree that a nurse is a very essential feature of the treatment.

There is the famous rest-cure treatment (of Dr. S. Weir Mitchell) where the nurse must give the patient massage and electricity,* either local or general. There are baths to be given at stated times; diets to be attended to. Certain hours for sleep, certain hours for recreation, to be watched over.

Again we have patients who must be taken out and amused; there are stores, theatres, art galleries and museums to be visited.

A nurse may attend faithfully to all these details, but it will be of little avail unless she understands and is in sympathy with her patient.

Every person in the world has his or her own peculiarities, and the nervous patient is, of course, abounding in them. Now these peculiarities must be studied faithfully, and one must be able to judge whether it is for the good of the patient to humor them or ignore them.

Of course there is the general advice given regarding nervous people, "Keep their minds off themselves," but this must not be done too quickly. Never let a patient know that you are trying to draw her away from herself. It will probably either lead her to think that she is very ill, and that you are trying to keep it from her, or, on the other hand, you will hurt her feelings by making her realize that her troubles are imaginary, and that you are trying to divert that imagination.

[*Years ago Dr. Mitchell's nurses never gave the massage and electricity. Are they required to do it now?—Ed.]

Always try to learn by a glance at your patient whether her mind is in need of light subjects, or of more weighty matters; and, again, learn when you are to talk and when keep quiet.

Always make the patient whom you are attending your particular study at that time; take her as you would some new language, and learn well her moods and tenses, her conjugations and expressions.

Whatever you do, do intelligently, for nervous persons are quick to distinguish lack of intelligence.

I fear that the general idea is, among nurses, that nervous patients are more or less fakes, to use a slangy expression.

We so often hear a nurse remark,—with a shrug of her shoulders, and a half satirical look.—“Oh, she’s only a neurasthenic,” or, “She’s hysterical, that’s all, don’t bother with her.”

If that nurse will stop a moment to consider, she will realize that both neurasthenia and hysteria are diseases, and must be treated accordingly. Truly, both of these diseases are practically an uncontrolled state of the nerves. But are the nerves in an uncontrollable condition in a strong, healthy person?

We must build up their systems with proper food and exercise, and at the same time feed their minds with healthy thoughts.

I once read a letter from a well-known physician in which, writing about the diagnosis of a patient, he said: “Miss B. had another attack last night; during each one of these attacks, which are growing more frequent, she appears to be suffering untold torture. It seems to be a form of hysteria, and yet the term is so widely misunderstood, that one hates to mention it in connection with an intelligent person.”

Later he wrote, “Thanks to good nursing and the proper care of her diet, Miss B. has regained her strength, and has almost fully recovered.”

Above all things, in the care of the nervous, remember to be bright, up to date, thoughtful, cheery, but withal firm, and we will find often that these details are more essential than the giving of an electrical treatment on the dot of the minute ordered.

MABEL JACQUES.

Today is your day and mine, the only day we have, the day in which we play our part. What our part may signify in the great whole we may not understand; but we are here to play it, and now is our time. This we know: it is a part of action, not of whining; it is a part of love, not cynicism. It is for us to express love in terms of human helpfulness. This we know, for we have learned from sad experience that any other source of life leads toward decay and waste.—*David Starr Jordan.*